		ve Novem			C	99	360	635					
CLAIMS AS FILED - PART I (Column 1) (Column 2)										ENTITY	OR		R THAN ENTITY
FOR				ER FILED		NUMBER		7	RATE	FEE	7	RATE	FEE
BASIC FEE								E S		380.00	OR		760.00
TOTAL CLAIMS			j.	minus		•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS)_ minus	3 =	•			X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT									+130=	i i	OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	1	OR	TOTAL	200	
CLAIMS AS AMENDED - PART II									•			OTHER	THAN
_			ımn 1) AMS			olumn 2)	(Column 3)	,	SMALL		OR	SMALL	ENTITY
AMENDMENT A		REM.	AINING TER DMENT		PR	NUMBER EVIOUSLY VAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• /	5	Minus	**	90	•		X\$ 9=		OR	X\$18=	
A A	Independent	NTATIO	N OF MI	Minus	***	ENT CLAIM	-		X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+130=		OR	+260=	
BEST AVAILABLE									ODIT, FEE		OR ,	TOTAL	1000
l	1-22		mn 1)			olumn 2)	(Column 3)						
AMENDMENT B		REM/ AF	aims Aining Ter Dment		PR	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· <	6	Minus	212	20	- (X\$ 9=	· -	OR	X\$18=	
	Independent FIRST PRESE	* /	N OF MI	Minus	SENIO	3 ENT CLAIM	=		X39=		OR	X78=	
	1		11 01 140	, c. oc.		LIVI ODANI	,	֓֡֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֡֓֓֡֓֓֡֓	+1 30 =		OR	+260=	
								٠ 🗖	TOTAL DOIT, FEE		OR	TOTAL ODIT, FEE	
		(Colu	mn 1)		(C	olumn 2)	(Column 3)				•		
AMENDMENT C		REM/	UMS UNING TER DMENT		PR	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE:	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	·	Minus	**		=	▎┌	X\$ 9=		OR	X\$18=	
	Independent	•		Minus	***			-	X39=			X78=	
<u> </u>	FIRST PRESE	NTATIO	N OF MU	ILTIPLE DEF	END	ENT CLAIM		-			OR	~:0=	
•	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+130=		OR	+260=	
**	if the "Highest Nur If the "Highest Nur If the "Highest Nur The "Highest Nur	mber Pre	viously Pa	id For IN THI	S SPA	CE is less that	n 20, enter "20."	A	TÖTAL DOIT, FEE		OR ,	TOTAL DOIT, FEE	

Application or Docket Number